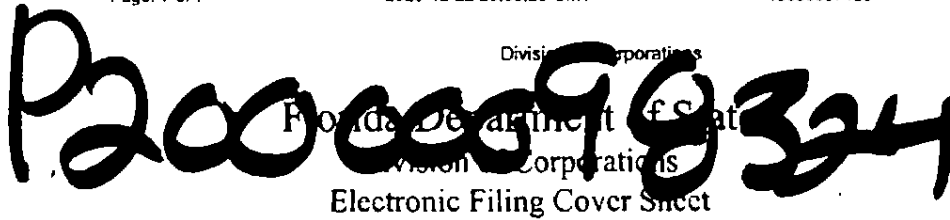


12/22/2020



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000436883 3)))



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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : ISAMAR TORRES
Account Number : I20200000137
Phone : (786)660-0108
Fax Number : (305)503-7123

20 DEC 22 PM 7:31
TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
VALDEZ SUPPLIES CORP**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2020 DEC 22 PM 3:20

Electronic Filing Menu

Corporate Filing Menu

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DEC 22 2020

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Valdez Supplies Corp
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
& Certificate of Status

[illegible]

FROM: Jacqueline Jaime
Name (Printed or typed)

4167 NW 135th St. 2nd Floor
Address

Opa Locka Fl. 33054
City, State & Zip

786-234-5250

Daytime Telephone number

jackiejaim@yahoo.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

H20000436883-3

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Valdez Supplies Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address
7353 SW 23rd St.

Mailing address, if different is:

Miami Fl. 33155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Roberto Valdes Echevarria - P Name and Title: _____

Address: 7353 SW 23rd St. Address: _____

Miami Fl. 33155

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

H 20000436883-3

20 DEC 22 PM 7:31
TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Roberto Valdes Echevarria
Address: 7353 SW 23rd St.
Miami FL 33155

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Roberto Valdes Echevarria
Address: 7353 SW 23rd St.
Miami FL 33155

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TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 12/22/20 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Roberto Valdes Echevarria

Required Signature/Registered Agent

12/22/20
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Roberto Valdes Echevarria

Required Signature/Incorporator

12/22/20
Date

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